									Application		Caption No.	
PATENT APPLICATION FEE DETERMINATION REC								·		on or Docket Number		
Effective October 1, 2003								J [1671-	07	95	Anne e all'alle de un
CLAIMS AS FILED - PART I (Column 1) (Column 2)									ENTITY	OTHER THAN-		
-∓	OTAL CLAIM	S	30						FEE	7	RATE	FEE
J.F.	OR			NUMBER-FILED		-NUMBER EXTRA		BASIC F			BASIC FEI	
T	OTAL CHARGE	ABLE CLAIMS	<i>30</i> minus 20=		•			VC 6			70.0	1
	DEPENDENT (· · · · · ·		minus 3 =		•		XS-9=		OR	- X\$18=	180
 		NDENT CLAIM P	<u> </u>			2		X43=		OR	X86=	172
			TLJENI				- +145=		OR	+290=-		
*If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	1122
CLAIMS AS AMENDED - PART II											•	THAN
_	(Column 1) (Column 2) (Column 3)							SMAL	L ENTITY	OR		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA	RA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* * *	Minus	**	OR	=	Ì	X\$ 9=			X\$18=	FEE.
	Independent		Minus	***		=			+	OR		
	FIRST PRESI	ENTATION OF M	ULTIPLE DEI	PLE DEPENDENT				X43=		OR	X86=	
								+145=		OR	+290=	I
								TOTA	_	OR	TOTAL ADDIT. FEE	
		•			• '							
MENT B	emeles (in the second second	- CLAIMS - REMAINING - AFTER - AMENDMENT		HIGHE NUMB PREVIOU PAID F	ÉR USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDM	Total	* *************************************	Minus			=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	•	X43=		l	X86=	
3	FIRST PRESE	JLTIPLE DEP	IPLE DEPENDENT CLAIM			Ŀ			OR	700-		
								+145=		OR	+290=	
								TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		REMAINING AFTER AMENDMENT		HIGHE: NUMBE PREVIOL PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
∑	Total	*	Minus	**		=	1	X\$ 9=		أجة	X\$18=	
ğ Z	Independent	•	Minus	***		=	-			ÖR		
▼	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						L	X43=	<u> </u>	OR	X86=	
+145=										OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR A	TOTAL DDIT. FEE	
T	rtne "Highest Nur he "Highest Num	mber Previously Paid ober Previously Paid	id For IN THIS I For (Total or	3 SPACE is I Independen	ess than t) is the	3, enter *3.* highest number			propriate box			

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